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ABSTRACT

This collection materials describes and illustrates various features of New Mexico Junior College's (NMJC's) career ladder program for nursing. Introductory material outlines the internal institutional factors and external influences from the nursing field that served as the basis for the development and implementation of the career ladder program. The next sections explain the curricular options for articulation students who will transfer to a four-year program, and for generic students who may pursue tracks leading to a nursing assistant's certificate, a Licensed Practical Nurse's (LPN) diploma, or an associate degree in nursing. The paper offers evidence of the success of the program, citing the unique contributions of articulation students (who often have years of actual hands-on clinical experience) and the generic students (who have a strong foundation in nursing theory and process). Finally, articulation efforts with the University of New Mexico are noted. Attachments include: (1) job descriptions and appraisal forms for nursing assistants, LPN's, associate degree nurses (ADN's), and baccalaureate degree nurses; (2) a summary of the steps involved in establishing the career mobility program at NMJC; (3) an outline of the issues involved in translating experience into academic credit; (4) an outline of the role change involved in the transition from an LPN to an ADN; (5) the NMJC mission statement; (6) position statements by the American Nurse's Association and National League for Nursing on educational issues; (7) information on New Mexico's Systems for a Nursing Articulation Program (SNAP); (8) curriculum information; and (9) data on the success of students enrolled in the career ladder program in passing the LPN examination, on enrollment and graduation trends, and on board examination results. (EJV)

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DEVELOPMENT OF A CAREER LADDER MOBILITY PROGRAM IN NURSING

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DEVELOPMENT OF A CAREER LADDER MOBILITY PROGRAM IN NURSING

Perhaps the best place to start with our presentation is to give a brief overview of the steps that led the nursing faculty at New Mexico Junior College to implement a career ladder program for nursing. The nursing faculty identifed several factors that served as the basis for the development and implementation of the career ladder concept in nursing. The first factor that was identified is the Mission Statement of New Mexico Junior College. The Mission Statement defines one of the obligations of the institution "to provide for Job/Career entry skills. A second obligation is for "the upgrading of professional and technical skills" for the population located in the New Mexico Junior College service area.

A second factor leading to the development of the career ladder concept was the American Nurse's Association's Position Paper on Education for Nursing. The ANA developed 5 assumptions that have direct impact on nursing and nursing education. These assumptions are: 1) the demand for the services of nurses will continue to increase; 2) the professional practitioner is responsible for the nature and quality of all care patients receive; 3) the services of professional practitioners of nursing will continue to be supplemented and complemented by the services of nurse practitioners who will be licensed; 4) education for those in the health profession must increase in depth and breadth as scientific knowledge expands; and 5) the professional association must concern itself with the nature of nursing practice, the means for improving nursing practice, and the education necessary for such pratice. These assumptions led the ANA to adopt the following positions. First, the education for all those who are licensed to practice nursing should take place in institutions of higher learning. Secondly, the minimum preparation for beginning professional nursing practice at the present time should be

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a baccalaureate degree in nursing. Thirdly, the minimum preparation for beginning technical nursing practice at the present time should be an associate degree in nursing.

The National League for Nursing provided a third factor that supported the New Mexico Junior College faculty in developing a career ladder concept. In a position statement issued on Preparation for Practice of Nursing, the League stated a belief that a number of educational alternatives are necessary to fulfill the pur- pose of nursing's primary goal of meeting the health care needs of the nation. The League recognizes 3 levels of nursing practice at the present time. These levels are: 1) the vocational level (LPN's or LVN's); 2) the technical level (ADN's and Diploma Nurses); and 3) the professional level (BSN's). The League encourages individuals to reach self-fullfillment through education and calls upon educational institutions to develop plans for implementing educational mobility. These plans for educational mobility should contain ways that facilitate advanced placement for nurses seeking higher levels of nursing.

The fourth and last factor was the Systems for a Nursing Articulation Program or SNAP Project. New Mexico has been very fortunate to have had the SNAP project. This project, funded by the Kellogg Foundation, made it possible for New Mexico to develop career mobility rapidly. SNAP identified six major areas of concern relating to all health care workers. These major areas were: 1) nursing process; 2) communication; 3) management; 4) teaching/learning; 5) health care delivery systems; and 6) change. Educators from all levels - - practical nursing, associate degree nursing, and baccalaureate nursing - - spent years identifying minimum behavioral expectations for each level. (SHOW OVERHEADS) These minimal behavioral expectations serve as the basis for nursing articulation.

The New Mexico Junior College Career Mobility program began in 1974. Since that time we have intermingled practical nursing and generic students in the sophomore class. Based upon our experience, we have identified six areas of concern for all students but particularly for our articulation students. These areas of concern are: 1) communication skills; 2) nursing process; 3) anatomy and physiology background; 4) lack of confidence in their own abilities; 5) role change; and 6) financial concerns. These areas of concern were addressed when the curriculum was revised in 1980 to 1982.

The curriculum for the generic students contains 68 required hours. Half of these required hours are in nursing and half are in general education courses. Communication skills, nursing process, lack of confidence and role change are introduced early in the first semester of nursing. Each suceeding semester. As you can see by the overhead, all generic students have a full year or 8 semester hours of anatomy and physiology.

Generic students who wish to become LPN's spin off at the end of the first year. These students will take an 8 week summer course to prepare them to take the LPN board examinaitons. Many of our generic students opt to take the Summer LPN component as well as continue in the ADN program in the Fall. For those students who decide to quit at the completion of the first semester of nursing, a nursing assistant's certificate is given.

The curriculum for the articulation student is different. These students are given credit for 13 hours of nursing by either successfully challenging NU 116 and NU 127 or by successfully completing an NLN accredited vocational nursing program with the past 5 years. These students schedule the best time for them to take challenge examination. The students challenge only the theory component of

the nursing classes. We have found this to be cost effective for several reasons. The SNAP project identified the minimum clinical competencies of the Licensed Practical or Vocational Nurse. The faculty know what these nurses can or cannot do in the clinical setting. Each of the articulation students are highly motivated or they would have never returned to school to upgrade their skills. Also, the faculty believes in the transferability of credits earned in one institution to another instituion. Please refer to handout on transfering experience into academic credit. Each articulation student is given blanket credit for 1 semester or 4 hours of anatomy and physiology. They may meet the other 4 hours in 2 ways. They may either enroll in the class or they may take the second semester in a modular form. These modules have been developed by Mr. Donald Green, our Anatomy and Physiology Professor. This requirement must be completed before the articulation student enters the sophomore level of nursing.

A special 3 hour class (NU 213) has been designed as a leveling course for all articulation students. This class is required and must be completed prior to entry by the articulation student into the sophomore year of nursing. The class is offered as a compacted 3 week course immediately preceeding the beginning of the Fall semester. This class introduces communication skills, nursing process, role change, and lack of confidence in the student's ability to perform at expected levels. The nursing theorist that the curriculum is based upon is also introduced in this class. Clinical skills are informally evaluated in the clinical component of the nursing articulation class.

Articulation students are expected to meet all other general education requirements for graduation. A total of 68 hours are required for graduation, 60% of these hours are in nursing while 40% of these hours are in general education courses. The articulation students may either take the required classes at New Mexico Junior College or transfer acceptable credits from other insitutions of higher learning.

The financial concerns for both the generic student and the articulation student are turned over to the financial aids department of the college. There are many grants, scholarships, and work/study positions offered for nursing students. The Director of Allied Health works in close conjunction with the Director of Financial Aids to enable the nursing students to fully utilize any financial aid that ia available for them. Many of the articulation students find part-time work at the local hospital or nursing homes.

Now that we've gone through the mechanics of how the program is set up, the question remains "Does the program work?" The nursing faculty can give an unqualifed and enthusiastic "YES."

Both the generic students and the articulation students bring something unique to the nursing program. The generic student is strongly based on nursing theory and nursing process while the articulation student often has years of actual hands on clinical experience. Both types of students become integrated into a cohesive class by approximately 6 weeks into the Fall semester. The students begin sharing their strengths and seek help from other classmates to improve in an area they feel they are weak. The total nursing program becomes stronger because of the intermingling of students.

Perhaps the single most important questions is "Do the students pass the NCLEX examination?" (SHOW GRAPHS). (Talk about the increase in FTE's at NMJC and other types of programs, BSN and 2 plus 2 programs).

The faculty at New Mexico Junior College believes in educational mobility. We have been closely working with the University of New Mexico to allow some of the classes that our students take to articulate into the univeristy's 4 year BSN program. Two of our classes have been designed specifically for the purpose of articulation. These classes are the pharmacology class and the growth and development class with a lab. These classes are accepted by the university as part of the required classes needed to compelte a BSN.

In conclusion we would like to refer to an old parable concerning the grasshopper and the owl. In the animal kingdom, the owl has a reputation for being very wise, therefore, when the grasshopper had a personal problem he would seek the help of the owl. Each winter the grasshopper suffered severe pain due to the cold weather. After several winters of the recurring problem, he sought the advice of the wise old owl. The owl listened to his problem and prescribed a simple solution. "Simply turn yourself into a cricket and hibernate." The grasshopper left pleased with the information only to discover something was missing. Returning to the owl he asked how he should go about performing the metamorphosis. The owl snapped back, "Look, I've given you the principle, now it is up to you to determine the details." We have only given you the principles, the details will be up to each of you. We firmly believe that nursing articulation is feasible at all levels of nursing practice. Thank you for allowing us to be with you today. We have enjoyed it.

MATERIAL
TO
ACCOMPANY
PRESENTATION

ARTICULATION IN AN ASSOCIATE DEGREE NURSING PROGRAM

PRESENTED BY
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AND
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NISOD CONFERENCE
AUSTIN, TEXAS
MAY 23, 1985

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New Mexico SNAP Project: System for a Nursing Articulation Program

JOB DESCRIPTION AND APPRAISAL FORM-DRAFT 1979

Nursing Assistant - Nursing Process

Standard: The nursing assistant utilizes technical and mechanical skills in assisting the nurse to implement the plan of care for a client or group of clients in a structured setting.

Expected Behavior:

1. Collects data pertinent to client's safety and comfort needs.
2. Participates with health team members in formulating a plan of care in client care conferences.
3. Gives effective basic nursing care to a client or a group of clients as assigned.
4. Adapts nursing care to allow for cultural diversity.
5. Assists with selected diagnostic nursing measures.
6. Recognizes limitations and requests help when needed.

Nursing Assistant - Communication

Standard: The nursing assistant utilizes basic communication skills, including medical terminology and abbreviations frequently used in client care.

Expected Behavior:

1. Uses appropriate medical terminology and abbreviations; asks for interpretation when in doubt.
2. Respects confidentiality when sharing client communication.
3. Recognizes an obvious block in communication.
4. Documents or records findings according to institutional policy.
5. Verbally and nonverbally, demonstrates the ability to relate to the client, family, and health team members.

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Nursing Assistant - Management

Standard: The nursing assistant uses own abilities and other available resources to plan and organize care for a client or group of clients.

Expected Behavior:

1. Maintains appropriate appearance.
2. Maintains personal health.
3. Demonstrates interest in self-improvement through continuing education.
4. Works within ethical-legal limitations.
5. Recognizes that facility costs are employee/client costs by practicing conservation of available resources.
6. Organizes own assignment.
7. Works within regulations of clinical setting.
8. Provides regulations to client and family as directed.

Nursing Assistant - Client Teaching/Learning

Standard: The nursing assistant, under supervision, participates in health teaching of client and family.

Expected Behavior:

1. Contributes information of client's personal habits and perferences in the development of a teaching plan.
2. Implements a portion of the teaching plan as delegated by an appropriate health care member.
3. Relays client's requests for information to appropriate health team member.

Nursing Assistant - Health Care Delivery Systems

Standard: The nursing assistant has basic knowledge of local health care delivery systems and is able to function within her own setting.

Expected Behavior:

1. Is aware of local health care resources.
2. Performs within limitations of job description.

Nursing Assistant - Change

Standard: The nursing assistant demonstrates a willingness to accept change.

Expected behavior:

1. Implements procedural changes as directed.
2. Accepts guidance in changing own behavior.

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Licensed Practical Nurse - Nursing Process

Standard: The practical nurse assists in implementing the nursing process.

Expected Behavior:

1. Completes a structured form with appropriate responses.
2. Reports obvious client problems immediately to person in charge.
3. Participates in writing nursing care plans.
4. Follows instructions in carrying out plan of client care.
5. Adapts nursing care to allow for cultural diversity.
6. Administers medications and treatments safely.
7. Records the effects of medications and treatments.
8. Charts medications and treatments given.
9. Assists in evaluating care given.

Licensed Practical Nurse - Communication

Standard: The practical nurse uses communication skills effectively in order to function as a member of the health team.

Expected Behavior:

1. Utilizes common medical terminology and abbreviations.
2. Interacts in a one-to-one relationship or in a group setting.
3. Questions directions when appropriate.
4. Reports unresolved problems to immediate supervisor.
5. Holds provessional discussions with consideration to appropriate time, place, and person.

Licensed Practical Nurse - Management

Standard: The practical nurse plans and organizes own assignment in a structured setting and demonstrates responsibilities for own actions.

Expected Behavior:

1. Maintains appropriate appearance.
2. Maintains personal health.
3. Attends inservice education appropriate to work setting.
4. Performs only tasks for which he/she has been prepared.

5. Demonstrates ability to plan, organize, and prioritize assignments.

6. Assumes responsibility for own actions.

7. Demonstrates a working knowledge of regulations.

Licensed Practical Nurse - Client Teaching/Learning

Standard: The practical nurse assists in health teaching of clients, recognizing individual differences.

Expected Behavior:

1. Reviews client teaching with team members.

2. Assists in individualizing the teaching plan.

3. Documents client's responses to teaching.

Licensed Practical Nurse - Health Care Delivery Systems

Standard: The practical nurse has the knowledge to understand own function in the health care system.

Expected Behavior:

1. Functions within the agency limitations of the practical nursing role.

2. Respects the rights of individuals to make decisions concerning utilization of health services.

Licensed Practical Nurse - Change

Standard: The practical nurse recognizes the need for change within a structured health care setting and demonstrates a willingness to change.

Expected Behavior:

1. Communicates need for further changes through appropriate channels.

2. Demonstrates acceptance of plans for change.

Associate Degree Nurse - Nursing Process

Standard: The associate degree nurse is accountable to operationalize the nursing process, assessment, planning, implementation, and evaluation designed to alleviate, minimize, or prevent problems and to promote and maintain health. This should utilize the client, health team, and significant others.

Expected Behavior:

1. Accurately completes history on data recording sheet, including deviations from normal.
2. Exercises initiative in obtaining history from alternate source when client is unable to communicate.
3. Formulates an individualized list of client needs/problems.
4. Initiates a prioritized care plan for each client on admission.
5. Identifies individualized approaches to meet client needs.
6. Communicates to all team members changes in care plan.
7. Administers medications, treatments, and tests appropriately.
8. Adapts nursing care to allow for cultural diversity.
9. Initiates procedures for emergency care.
10. Assesses the effectiveness of nursing interventions.
11. Records assessments, interventions, and outcomes.

Associate Degree Nurse - Communication

Standard: The associate degree nurse effectively uses communication skills.

Expected Behavior:

1. Records pertinent information in client records.
2. Documents client responses to the nursing care accurately and appropriately.
3. Uses information from clients and others in adapting nursing care.
4. Identifies barriers to the communication process.
5. Asks questions appropriately in gathering needed information.
6. Maintains confidentiality in all apsects of performance and interactions.

Associate Degree Nurse - Management

Standard: The associate degree nurse organizes her work effectively, utilizes resources efficiently, and provides guidance to team members for whose performance she/he is responsible.

Expected Behavior:

1. Maintains personal health.
2. Maintains appropriate appearance.
3. Identifies goals for each client.
4. Utilizes resources efficiently.
5. Recognizes skills of various team members as defined in job descriptions.
6. Makes appropriate assignments.
7. Identifies professional goals.
8. Seeks experiences to promote professional growth.
9. Participates actively in unit activities.
10. Assumes responsibility for own continuing education.
11. Follows institutional procedures.
12. Practices within the scope of the license as defined in Nurse Practice Act.
13. Follows organizational lines of authority.
14. Provides for team conferences.

Associate Degree Nurse - Health Care Delivery Systems

Standard: The associate degree nurse demonstrates awareness of organizations and institutions that provide preventive, therapeutic, and rehabilitative health services; identifies client needs for these services and initiates appropriate procedures.

Expected Behavior:

1. Recognizes the client's need for referral.
2. Makes initial contacts to appropriate referring agency.
3. Communicates ongoing plan to referral services.

Associate Degree Nurse - Client Teaching/Learning

Standard: The associate degree nurse initiates basic health teaching for patients and family concerning preventive and/or therapeutic measures as a part of total nursing care.

Expected Behavior:

1. Assesses client's capacity for learning.
2. Involves the patient and significant others in formulating a teaching plan with stated objectives.

3. Selects appropriate materials to use for implementing the plan.

4. Documents outcomes of client teaching.

Associate Degree Nurse - Change

Standard: The associate degree nurse utilizes a systematic approach to identify problem areas and to effect change.

Expected Behavior:

1. Identifies need for change.

2. Identifies problems in implementing change.

Baccalaureate Degree Nurse - Nursing Process

Standard: The BSN is accountable to operationalize the nursing process with groups of clients in a structured or unstructured setting, utilizes knowledge to assess health practice and identify the need for more information. For health promotion and mainteanance, incorporates consideration of family in developing plan of care.

Expected Behavior:

1. Selects information from a variety of sources.
2. Organizes the information obtained according to priorities in the nursing care plan.
3. Implements nursing care following prepared plan.
4. Adapts nursing care to allow for cultural diversity.
5. Sets objectives to meet the needs of the client and his family.
6. Records assessment, interventions, and outcomes.
7. Evaluates care provided in terms of outcome criteria.
8. Revises plan of care.

Baccalaureate Degree Nurse - Communication

Standard: The BSN has the ability to utilize terminology, theory, and concepts of communication in writing, speaking, and doing, and is able to guide others through example in the utilization of communication skills.

Expected Behavior:

1. Assists health team members to identify mechanisms to improve communication with clients and staff.
2. Facilitates resolution of conflict.
3. Evaluates effectiveness of communication.
4. Utilizes health care records to document client progress.
5. Maintains confidentiality in all aspects of performance and interactions.

Baccalaureate Degree Nurse - Management

Standard: The BSN begins to actualize leadership ability and the basic elements of administration: organizing, controlling, staffing, directing, and planning.

Expected Behavior:

1. Maintains personal health.
2. Maintains appropriate appearance.

3. Identifies human and other resources necessary to effect optimal client care.

4. Takes into consideration strengths and weaknesses of team members in planning activities for health care.

5. Promotes effective conservation of resources (human and material).

6. Directs the nursing activities in a manner that focuses on client care.

7. Includes others in decision making (participatory management).

8. Provides for team conferences.

9. Constructs elementary staffing plan, using basic staffing theory.

10. Follows organizational lines of authority.

Baccalaureate Degree Nurse - Client Teaching/Learning

Standard: The BSN coordinates, teaches, and evaluates teaching/learning activities as these relate to meeting client, family, or staff needs as appropriate.

Expected Behavior:

1. Assists team members to identify learning needs of clients.

2. Identifies multiple health education needs of clients.

3. Formulates teaching strategy to assist clients in dealing with complex health problems.

4. Assists in developing teaching materials appropriate to client's needs.

5. Selects alternative teaching strategies to modify teaching plan.

6. Implements teaching plan for client and groups.

7. Evaluates, in light of objectives, teaching plan for clients.

8. Revises teaching plan as necessary.

9. Documents outcomes of client teaching.

Baccalaureate Degree Nurse - Health Care Delivery Systems

Standard: The BSN identifies and communicates with the appropriate system necessary to assist the client in the attainment or maintenance of health.

Expected Behavior:

1. Recognizes need for client referral.

2. Contacts appropriate agency for referral.

3. Provides follow-up activities related to client referral.

Baccalaureate Degree Nurse - Change

Standard: The BSN possesses basic knowledge, skill, and motivation necessary to effect change within the scope of clinical role.

Expected Behavior:

1. Identifies needs for change.
2. Assists in development of plan for change.
3. Participates in the sequence of planned change.
4. Analyzes the effectiveness of change.
5. Participates in the research process.
6. Implements research findings as appropriate.

SUMMARY OF SOME OF THE STEPS IN ESTABLISHING
A CAREER MOBILITY PROGRAM AT NEW MEXICO JUNIOR COLLEGE

1. Feasibility study conducted to determine need of the career mobility nursing program.

2. Formation of advisory committee.

3. Concurrence of deans, vice president, president, and college board.

4. Development of philosophy, agreement upon conceptual framework, objectives, etc. etc.
5. Development of curriculum.

6. Approval by state board of nursing.

7. Development of entrance criteria (population to be served determined during feasibility phase).

8. Establishment of procedures to grant credit for education completed at non-credit granting.
   A. Proposal written and submitted to Curriculum and Academic Standards Committee of college.
   B. Approved and forwarded to president.
   C. Approved by president and forwarded to college board.
   D. Approved by college board.
   E. Registrar notified credit to be granted to graduates of state approved schools of practical nursing who have completed their program within the last five years.
   F. Credit granted to practical nurses:
      BI 214A - 4 semester hours of Paramedical Anatomy and Physiology
      NU 116 -- 6 semester hours of Fundamentals of Nursing
      NU 127 -- 7 semester hours of Clinical Nursing I
      NU 111 -- 1 semester hour of Mental Health
      (Above validated from SNAP project)
      Those students who graduated more than five years ago from a practical program are required to complete a challenge test for the above credit.

9. Development of a modular Anatomy and Physiology course (BI 224B). This was done to facilitate entrance into sophomore level. This course not available in many areas.

10. C.L.E.P. - Credit by examination encouraged for other academics (English, Sociology, Psychology, electives.)

11. Support services required
   A. Strong financial aid office.
   B. Counseling department for referral for personal problems.
   C. Developmental Studies Program - student tutors, reading improvement courses.
   D. Cooperating employment agencies to allow students work schedules to be flexible.
   E. Student Nurses Association for unity.

12. Sincere commitment by faculty.
   A. Requires more individual contact.
   B. Advisable to have a workshop for advanced standing students before the generic students return. Included in this workshop:
      (1) How to study.
      (2) How to obtain academic assistance.

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(3) Nursing process - care plans, drug cards.
(4) Determine areas of need, i.e., obstetrics, surgical.
(5) Communication skills.
(6) Team work concepts.

C. Assessment of previous education.

D. Clinical scheduling of generic and advanced standing to promote a blending of the two groups.

E. Identification of skills which probably have not been taught at the practical nursing level.

F. Skills taught at New Mexico Junior College at the sophmore level:
(1) Physical assessment skills
(2) One-man rescue
(3) Two-man rescue
(4) Obstructed airway - conscious
(5) Obstructed airway - unconscious
(6) Infant resuscitation
(7) Tracheotomy care
(8) Suctioning
(9) OR scrub
(10) Gowning/closed gloving
(11) Starting IV
(12) Operation of Abbott Life Care Pump
(13) Central venous pressure
(14) Phone orders/answering phone
(15) Chest tubes/waterseal drainage
(16) Circ-O-Lectric bed
(17) Stryker frame
(18) Tractions
(19) Isolette
(20) Gavage feeding - infant
(21) Weighing infant in isolette
(22) Vision testing
(23) Hearing testing
(24) Breast exam
(25) Insulin administration
(26) Review math calculations

G. Acceptance of the cultural difference in students.

H. Acceptance of the individual worth of the student.

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TRANSLATING EXPERIENCE INTO ACADEMIC CREDIT

By: Martha S. Albert, Ph.D.

Introduction

Translating experience into academic credit has been idiosyncratic: sometimes an LPN can get a baccalaureate degree in the same time or within 1/2 year of the time required for an associate degree.

Such variety is possible because students look near home and do not "shop" for programs.

Educators should provide challenge exams and other means of recognizing past education.

Uniformity in recognition of past education is unlikely in the 1980s.

College philosophy is crucial to granting credit for past experience.

The credentialing society provides formidable obstacles to adult learners.

Which is most crucial: teaching or learning?

Sources of resistance: Faculty and administrators

"If you haven't learned it from me in my classroom, you haven't learned it" (a set of values rather than knowledge).

"Education is toc subjective for provision of credit for past experience" (All on-campus learning experiences are evaluated subjectively, anyway).

"If...students can obtain through their experience what university faculties have labored for and prepared to give for the greater part of their working life, then what exactly would be the justification of having a faculty?...Either I am a credentialer or I am a teacher." (The crediting of prior learning allows more faculty-student interchange than does the normal classroom situation).

"Accrediting associations don't let us give credit for prior learning" (There is no evidence that any regional or national accrediting agencies prohibit credit for prior learning).

Major issues

Equivalence of prior experience to field instruction.

What shall be credited: life/work experience; knowledge, competence or skill gained from experience; analyses of learning from experience; analysis or synthesis of discrete knowledge from experiences.

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Translating Experience into Academic Credit

Methods of Resolution

Delineation of formulas.

Determination of total possible experiential credit.

Defining core curriculum.

Direct vs. indirect translation of work experience into credit and the use of challenge exams.

Future goals criteria.

Degree program criteria.

Valuation of campus experience.

Logistics

Institutional guidelines

Catalogs and publicity.

Record-keeping and documentation.

Procedures and student counseling.

Program validation.

Tracking student progress.

Student mobility and transfer.

Administrative uses of "credit."

Representing outcomes.

Conclusions

Competence, credit and credentialing.

Current practices in brief.

Assessing learning through varied methods.

Program "credibility" factors and how you can control them.

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ROLE CHANGE - LPN TO ADN

By: Martha S. Albert, Ph.D.

1. Concept of self as nurse.

   Task vs. overview.

   Subordinate vs. supervisor.

   Implementation vs. conceptualization and planning.

   LPN vs. ADN relations with health care team members.

2. Problems involved in ADN education = role change as student.

   LPN education seems "practical."
   ADN education seems "vague."

   LPN education involves seeing and doing.
   ADN education involves remembering and applying theory to the nursing process.

   LPN education is more narrowly training; ADN education is broad and collegiate.

3. Assimilation into the college setting: a potential role change difficulty.

   Less structure in learning experiences.

   More encounters with young people.

   Lack of task clarity.

   Lack of self confidence when competing with younger students.

   Family and financial pressures.

   Less familiarization with opportunities offered by a campus environment.

   Crucial socialization process for adjustments.

4. What Role Theory suggests about the LPN/ADN transition.

   Career commitment is critical for the endurance, tenacity and sacrifices involved.

   Reference groups can support or undermine career commitment.

   Informal relations with faculty have a greater and more enduring personal affect than group situations, including classes.

   Adult socialization can result in adoption of values and/or behaviors resulting in: (1) The Socialized, (2) The Dilettante, (3) The Chameleon and (4) The Unsocialized.

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Conformity to group norms (of college students) may be difficult or inappropriate for older LPNs, but they can earn idiosyncrasy credits instead.

Perception of vulnerability may be countered by formation of a professional reference group.

Role strain is inevitable during the transition to RN from LPN; role bargains reduce role strains.

Contingencies which affect career socialization usually favor conformity.

Social-psychological mechanisms lead to acquisition and maintenance of occupational identities.

Personality affects career and adult socialization.

4. Colleges can foster more complete socialization by encouraging and providing pre-enrollment and ongoing personal and academic counseling.

Enabling students to examine alternative ways of paying for the ADN.

Providing assertiveness training for applicants and incoming students.

Scheduling classes and requirements to fit the needs of older students.

Initiating child care arrangements and listing car pool "exchanges."

Dealing realistically in entry workshops with role change and culture shock.

Making sure students have assistance in negotiating the college environment.

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NMJC Mission Statement

The mission of New Mexico Junior College is to provide a variety of life-long learning opportunities for the people of the service area. Taking into consideration the educational and cultural diversity of the population as well as the needs of communities, business, and industry, an appropriate array of high quality learning experiences will be offered throughout the service area insofar as resources will allow.

The College intends to provide opportunities for:

Individuals
— Personal growth and development
— Job/Career entry skills development and/or upgrading
— Transfer to other institutions
— Professional development

Communities
— Community service
— Community enrichment

Business and Industry
— Manpower training
— Professional and technical development

New Mexico Junior College recognizes its unique status in New Mexico as the original institution of higher education created under the provisions of the 1963 Junior College Act. As a comprehensive community college with a locally elected and autonomous governing board, NMJC is aware of the many formal and informal influences that affect the college in the accomplishment of its mission and goals.

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ANA's POSITION
ON
EDUCATION FOR NURSING

ASSUMPTIONS

The demand for the services of nurses will continue to increase.

The professional practitioner is responsible for the nature and quality of all care patients receive.

The services of professional practitioners of nursing will continue to be supplemented and complemented by the services of nurse pratitioners who will be licensed.

Education for those in the health professions must increase in depth and breadth as scientific knowledge expands.

The professional association must concern itself with the nature of nursing practice, the means for improving nursing practice, and the education necessary for such practice.

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ANA's POSITION
ON
EDUCATION FOR NURSING

POSITION STATEMENTS

The education for all those who are licensed to practice nursing should take place in institutions of higher learning.

Minimum preparation for beginning professional nursing practice at the present time should be baccalaureate education in nursing.

Minimum preparation for beginning technical nursing practice at the present time should be associate degree education in nursing.

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NLN
POSITION STATEMENT
ON
PREPARATION FOR PRACTICE IN NURSING

The league believes that, in the interest of the nation's health, individuals who wish to enter nursing should be free to choose from a number of educational alternatives, each of which legitimately fulfills the purpose of nursing's uppermost goal: to meet the health care needs of the nation.

NLN also believes that nursing career guidance must serve to help students select the program that best meets their personal and career goals.

Educational programs in nursing must be adaptive and responsive to the nursing needs of the people, and must plan accordingly to prepare practitioners to meet these needs.

Experimentation and innovation in all programs will be necessary to attract sufficient numbers of practitioners at all levels and to prepare them to meet the nation's health care needs.

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position statement on educational mobility

A Statement Approved by the Board of Directors, National League for Nursing, February 1982

Educational mobility, a characteristic of today's society, has strong implications for nursing, whose scope of practice currently encompasses vocational, technical, and professional nursing. Preparation for practice of each type can best be provided through appropriately designed, high-quality programs that are specific to their purpose and complete in themselves.

Individuals who wish to change career goals should have educational opportunities to advance from one type of nursing practice to another.* These opportunities will benefit individuals by allowing them to expand their scope of practice and thus move into areas of great responsibility. Society will be assured that nursing care needs will be met by knowledgeable and competent practitioners.

In addressing these needs, educational institutions are responsible for setting policies on admission, graduation, and transfer and earning of credits. The faculty in each institution is responsible for applying these policies to their individual programs and developing curricular patterns and content in keeping with their beliefs and the purposes of the program. In a plan for educational mobility, opportunity should be provided for students to validate previously acquired educational and clinical competencies to facilitate advanced placement.

The NLN supports the concept of educational mobility and encourages the preservation of this right of individuals to self-fulfillment.

* See "Position Statement on the Open Curriculum in Nursing Education," approved by the NLN Board of Directors, October 1981.

Pub. No. 11-1892

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System for a Nursing Articulation Program
NURSING ASSISTANT
JOB DESCRIPTION

Nursing Process

The nursing assistant utilizes technical and mechanical skills in assisting the nurse to implement the plan of care for a client or group of clients in a structured setting.

Communication

The nursing assistant utilizes basic communication skills, including medical terminology and abbreviations frequently used in client care.

Management

The nursing assistant uses her own abilities and other available resources to plan and organize care for a client or a group of clients.

Teaching/Learning

The nursing assistant, under supervision, participates in health teaching of client and family.

Health Care Delivery Systems

The nursing assistant has basic knowledge of local health care delivery systems and is able to function within her own setting.

Change

The nursing assistant demonstrates a willingness to accept change.

System for a Nursing Articulation Program
PRACTICAL NURSE
JOB DESCRIPTION

Nursing Process

The practical nurse assists in implementing the nursing process.

Communication

The practical nurse plans and organizes own assignment in a structured setting and demonstrates responsibility for own actions.

Management

The practical nurse plans and organizes own assignment in a structured setting and demonstrates responsiblity for own actions.

Teaching/Learning

The practical nurse assists in health teaching of clients, recognizing individual differences.

Health Care Delivery Systems

The practical nurse has the knowledge to understand own function in the health care system.

Change

The practical nurse recognizes the need for change within a structured health care setting and demonstrates a willingness to change.

System for a Nursing Articulation Program
ASSOCIATE DEGREE NURSE
JOB DESCRIPTION

Nursing Process

The associate degree nurse is accountable to operationalize the nursing process to alleviate, minimize, or prevent problems and to promote and maintain health. This should utilize the client, health team, and significant others.

Communication

The associate degree nurse effectively uses communication skills.

Management

The associate degree nurse organizes her work effectively, utilizes resources efficiently, and provides guidance to team members for whose performance he/she is responsible.

Teaching/Learning

The associate degree nurse initiates basic health teaching for patients and family concerning preventive and/or therapeutic measures as a part of total nursing care.

Health Care Delivery Systems

The associate degree nurse demonstrates awareness of organizations and institutions that provide preventive, therapeutic, and rehabilitive health services; identifies client needs for these services and initiates appropriate actions.

Change

The associate degree nurse utilizes a systematic approach to indentify problem areas and to effect change.

System for a Nursing Articulation Program
BACCALAUREATE DEGREE NURSE
JOB DESCRIPTION

Nursing Process

The BSN is accountable to operationalize the nursing process with groups of clients in a structured or unstructured setting, utilizes knowledge to assess health practice and identify the need for more information. For health promotion and maintenance, incorporates consideration of family in developing plan of care.

Communication

The BSN has the ability to utilize terminology, theory, and concepts of communication in writing, speaking, and doing, and is able to guide others through examples in the utilization of communication skills.

Management

The BSN begins to actualize leadership ability and the basic elements of administration: organizing, controlling, staffing, directing, and planning.

Teaching/Learning

The BSN coordinates, teaches, and evaluates teaching/learning activities as these relate to meeting client, family, or staff needs as appropriate.

Health Care Delivery Systems

The BSN identifies and communicates with the appropriate system necessary to assist the client in the attainment or maintenance of health.

Change

The BSN possesses basic knowledge, skill, and motivation necessary to change within the scope of the clinical role.

AREAS OF CONCERN
FOR
ARTICULATION STUDENTS

A. Communication Skills

B. Nursing Process

C. Anatomy and Physiology Background

D. Lack of Confidence in their own Abilities

E. Role Change

F. Financial Concerns

CURRICULUM FOR GENERIC STUDENTS

Required Nursing Courses

NU 116	Introduction to Nursing	6 credits
NU 127	Nursing in Health Deviations I	7 credits
NU 219	Nursing in Health Deviations II	9 credits
NU 250	Nursing in Multiple Health Deviations	10 credits
NU 222	Nursing Seminar	2 credits
	Total Nursing Credits	34 credits

General Education Courses

EN 113	Composition & Rhetoric	3 credits
BI 214A	Anatomy & Physiology I	4 credits
PS 113	Introduction to Psychology	3 credits
PS 213	Growth & Development	3 credits
BI 224A	Anatomy & Physiology II	4 credits
EN 123	Composition & Literature	3 credits
SO 213	General Sociology	3 credits
PC 213	Pharmacology	3 credits
BI 214	Microbiology	4 credits
	Elective(s) may be in Nursing or General Education	4 credits
	Total General Education Credits	34 credits

The distribution that exists for generic students is 50% nursing and 50% general education courses.

The distribution of courses for LPN's (LVN's) who enter the program at the beginning of sophomore year is slightly different.

CURRICULUM FOR ARTICULATION STUDENTS

Required Nursing Courses

NU 116	Introduction to Nursing (by challenge examination or by virtue of having graduated from an accredited program within the last 5 years.)	6 credits
NU 127	Nursing in Health Deviations I (by challenge examination or by virtue of having graduated from an accredited program within the last 5 years.)	7 credits
NU 213W	Articulation Course	3 credits
NU 219	Nursing in Health Deviations II	9 credits
NU 250	Nursing in Multiple Health Deviations	10 credits
NU 222	Nursing Seminar	2 credits
	Total Nursing Credits	37 credits

General Education Courses

EN 113	Composition & Rhetoric	3 credits
BI 214A	Anatomy & Physiology I (Blanket credit given to LPN's, LVN's)	4 credits
PS 113	Introduction to Psychology	3 credits
PS 213	Growth & Development	3 credits
BI 224A	Anatomy & Physiology II (Modular option available)	4 credits
EN 123	Composition & Literature	3 credits
SO 213	General Sociology	3 credits
PC 213	Pharmacology	3 credits
BI 214	Microbiology	4 credits
	Elective may be in Nursing or General Education	1 credit
	Total General Education Credits	31 credits

The distribution that exists for articulation students is 60% nursing and 40% general education courses. This is within NLN guidelines.

DATA RELATED TO CAREER LADDER PROGRAM

1st Year

YEARS	ENTERING FRESHMEN	NUMBER WRITING LPN EXAM	NUMBER / % PASSING LPN EXAM
1980-1982	61	18*	18 — 100%
1981-1983	51	29*	29 — 100%
1982-1984	68	26*	25 — 96%

* Does not indicate all those who completed 1st year as many choose not to take the LPN option.

DATA RELATED TO CAREER LADDER PROGRAM

2nd Year

YEARS	GENERIC STUDENTS	CHALLENGE AND TRANSFER STUDENTS	TOTAL NO. STUDENTS	NUMBER GRADUATED
1980-1982	16	26	42	29
1981-1983	21	23	44	38
1982-1984	18	27	45	39

DATA RELATED TO CAREER LADDER PROGRAM

NCLEX RESULTS

YEARS	GENERIC		TRANSER		TOTAL %
	PASS	FAIL	PASS	FAIL	PASSING
1980-1982	10	1	16	2	
	34%	4%	55%	7%	89%
1981-1983	18	0	19	1	
	47%	0%	50%	3%	97%
1982-1984	12	2	22	3	
	32%	5%	56%	7%	88%

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